The Fifth Annual Emergency Medical Preparedness Educational Symposium

September 19-21, 2000 (Pre-conference - September 18)

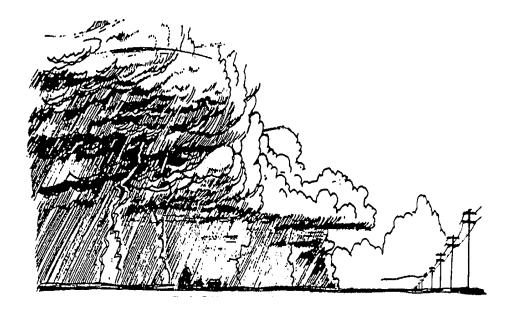
Holiday Inn Turf on Wolf Road 205 Wolf Road Albany, New York







"It's not IF... it's WHERE ...Disaster Strikes"



Presented Jointly by the::

Department of Veterans Affairs:

Emergency Management Strategic Healthcare Group
Healthcare Network Upstate New York
New England Healthcare System
Employee Education System

Healthcare Association of New York State

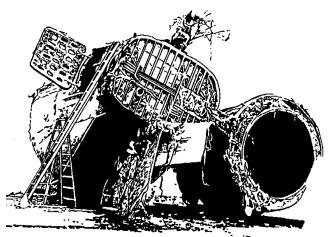
In Cooperation with:

Continuing Health Education Partnership, Inc., Togus, Maine Acadia Health Education Coalition











Main Conference (September 19-21) Program Description

Please join us for this unique and exciting educational experience. Symposium attendees will receive three days of didactic and hands-on education/training and continuing education credits. This year, we are offering the following four specialized tracks:

- Hospital Emergency Management
- Health and Medical Consequences of Disasters
- Disasters in the Community
- Practicum in Weapons of Mass Destruction

Program Objectives

Upon completion of this program, participants will be able to:

- Define, develop and implement Emergency Preparedness Plans for a specific healthcare organization or facility.
- Identify the health and medical consequences of disasters.
- Identify and define specific treatment regimes for various health and medical consequences of disaster situations.
- Identify management plans for coordinating responses to a community disaster.
- Identify lessons learned when responding to various community disaster events.
- Identify appropriate detection devices in the event a Weapon of Mass Destruction is deployed.
- Identify appropriate protective equipment and safety procedures when responding to a contaminated victim and/or situation.

Target Audience

Healthcare providers (physicians, nurses, nurse practitioners, physician assistants, emergency medical technicians, paramedics); emergency managers in hospitals, local, state, and federal roles; emergency preparedness coordinators; safety officers; public health officials, law enforcement; and first responders.

Continuing Education Credits

The Employee Education System (EES) is accredited as a provider of continuing education in nursing by the American Nurses Credentialing Center's Commission on Accreditation. The EES designates the educational activity on September 18 for 8.7 contact hours and the educational activity September 19-21 for 25.5 contact hours as determined by the American Nurses Credentialing Center's Commission on Accreditation. A certificate of attendance will be awarded, and accreditation records will be on file at the EES. In order to receive continuing education credit, participants must attend 100% of the program on September 18 and/or 100% of the program September 19-21 and complete an evaluation form(s).

The VA Employee Education System is accredited by the Accreditation Council for Continuing Medical Education to sponsor continuing medical education for physicians. The EES designates the continuing medical education activity on September 18 for 7 credit hours and the continuing medical education activity on September 19-21 for 21 credit hours in Category I of the Physician's Recognition Award of the American Medical Association.

Application for Continuing Education Hours for emergency care providers, administrators, and educators has been applied for through the

Continuing Education Coordinating Board for Emergency Medical Services (CECBEMS).

All other participants will receive 7 contact hours for September 18 and 21 contact hours for September 19-21, 2000.

The Employee Education System maintains responsibility for the program. A Certificate of Attendance will be awarded to participants, and accreditation records will be on file at the Employee Education System.

Hotel Accomodations

A block of rooms at reduced rates (\$89 single or double) plus 11% sales tax has been reserved for conference participants at the Holiday Inn TURF on Wolf Road, Albany, New York until August 29, 2000. Please contact the Reservations Department directly at (518) 458-7250 to reserve your room. Please be certain to state that you will be attending the Emergency Medical Preparedness Symposium. For visitor information in the Albany area, please contact the Albany County Convention and Visitors Bureau at 1-800-258-3582. If you are a VA employee, you may claim tax exemption by submitting a tax exemption form from your facility to the hotel at check-in time.

Planning Committee

Laura Barelski, M.S., R.N., A.C.N.P.

Department of Cardiology Samuel S. Stratton VA Medical Center Albany, New York

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Executive Director
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Faculty

Jakov Adler, M.D.

Member, Ministerial Planning Committee Director, Medical Section, ISRATEAM, Ltd. Israel

John Beatty, B.P.S., C.H.S.P.

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Director, Emergency Services Okaloosa County Shalimar, Florida

David Cid

Assistant Special Agent-in-Charge Federal Bureau of Investigation Oklahoma City, Oklahoma

Adam Darkins, M.D., M.P.H., F.R.C.S.

Acting Chief Consultant for Telemedicine Veterans Health Administration VA Medical Center Denver, Colorado

Lieutenant Colonel Robert Domenici

2nd Military Support Detachment WMD Civil Support Team New York Army National Guard Albany, New York

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Network Medical Director, VISN 2 VA Healthcare Network Upstate New York Albany, New York

Fun Fong, M.D., F.A.C.E.P.

Senior Medical Officer, GA-3 DMAT Former Director of Radiation Medicine Oak Ridge Associated Universities Oak Ridge, Tennessee

Ellery Gray, Ph.D., Capt., USPHS (Ret.)

Chief, Emergency Operations State Coordinating Officer for Health Florida Department of Health Tallahassee, Florida

Bob Harty, EMT-P

Certified Hazmat/Fire Science Instructor Hazmat Medical, A Division of Innovatec Joliet, Illinois

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Emergency Services Coordinator City of San Mateo Menlo Park, California

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Kristi Koenig, M.D., F.A.C.E.P.

Director, EMSHG
Department of Veterans Affairs
Washington, D.C.

Edward Lord

Area Emergency Manager, EMSHG VA Medical Center Minneapolis, Minnesota

Major Michael V. Malone

Operational Manager Force Medical Protection Advanced Concept Technology Demonstration U. S. Joint Forces Command Norfolk, Virginia

Paul Maniscalco, M.P.A., EMT/P

Deputy Chief, EMS Fire Department New York (FDNY) Staten Island, New York

Lorraine Martin, B.S.N., R.N.

Staff Nurse Pediatric Intensive Care Unit Albany Medical Center Albany, New York

C. Suzanne Mencer, B.S.

Consultant, Federal Bureau of Investigation Member, Governor's Commission on Columbine Littleton, Colorado

Liane Monroe

Area Emergency Manager, EMSHG VA Medical Center Salt Lake City, Utah

Cindy M. Novak, R.N.

Nurse Manager Apheresis/Outpatient Transfusion/Dialysis Albany Medical Center Albany, New York

Michael Olinger, M.D.

Director of Out-of-Hospital Care Department of Emergency Medicine I.U. School of Medicine Indianapolis, IN

James Orme, A. S.

Safety Officer/Fire Chief VA Medical Center Bath, New York

Robert Osgood

Special Agent Federal Bureau of Investigation Washington, DC

Richard A. Puff, B.S.

Assistant Director of Public Relations Albany Medical Center Albany, New York

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Area Emergency Manager, EMSHG VA Medical Center Richmond, Virginia

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Fire Protection Specialist N.Y. State Office of Fire Protection and Control Albany, New York

James Snyder, Ph.D., A.B.M.M.

Chief of Microbiology University of Louisville Hospital Louisville, Kentucky

John Tassey, Ph.D.

Director, Health Psychology Clinic Director, Vocational Rehabilitation Service VA Medical Center Oklahoma City, Oklahoma

David Teeter, Pharm.D.

Clinical Training Manager, EMSHG VA Medical Center Indianapolis, Indiana

Kevin Terry

Fire Protection Specialist N.Y. State Office of Fire Prevention and Control Albany, New York

John Urbanetti, M.D.

Director, Chemical Casualty Consultants CEO, Southeastern Pulmonary Associates New London, Connecticut

Raymond F. Walsh, M.D.

Vice Chairman and Attending Physician Department of Pediatrics Pediatric Intensive Care Unit Albany Medical Center Albany, New York

Donna L. Weatherwax, R.N.

Infection Control Coordinator Albany Medical Center Albany, New York

Rebecca Weber, M.S., R.N.

Clinical Nurse Specialist Bioterrorism Surveillance Unit Minnesota Department of Health (MDH) Minneapolis, Minnesota

Philip Wooten, Ph.D.

Policy and Strategic Planning, EMSHG VA Medical Center Martinsburg, West Virginia



Pre-conference: Exercise Design

Monday, September 18, 2000 8:00 a.m. - 5:00 p.m.

Course Description

This seven-hour course will provide the participant with a general overview of all hazards planning to meet the requirements for the JCAHO Environment of Care standard for emergency preparedness. Comprehensive Emergency Management (CEM) and the Incident Management (Command) System (ICS) will be discussed. The program will focus on how to design, conduct and evaluate an exercise as an effective tool for staff training.

Target Audience

Healthcare providers (physicians, nurses, nurse practitioners, physician assistants, emergency medical technicians, paramedics); emergency managers in hospitals, local, state, and federal roles; emergency preparedness coordinators; safety officers; public health officials; law enforcement; and first responders.

Course Objectives

Upon completion of this program, participants will be able to:

- Describe how CEM, including all hazards planning, will meet the requirements for the Environment of Care standard for emergency preparedness;
- List the five major organizational activities within the Incident Command System (ICS) and explain the primary functions of each;

- Describe the origin and development of Hospital Emergency Incident Command System (HEICS);
- List at least six benefits of integrating HEICS into a health care facility's emergency preparedness program;
- Describe essential components of an exercise from a tabletop to full-scale;
- Explain how a medical facility can design, conduct and evaluate an exercise as a means to implement, practice and evaluate its emergency management plan and as a tool to assess the knowledge of staff;
- Assist in designing and facilitating an exercise to evaluate the health care facility's emergency plan.

Faculty

William Campbell, B.S., NREMT-P Associate Planner, N.Y. State EM Paramedic, Albany Co. Sheriff's Department Albany, New York

James Carmona, M.P.A. Area Emergency Manager, EMSHG Edward Hines Jr. VA Hospital Hines, Illinois

Thomas Fargione

Inspector, Critical Incident Management Unit Albany County Sheriff's Department Albany, New York

Course Agenda

7:30 a.m.	Registration Continental Breakfast
8:00 a.m.	Welcome Announcements
8:05 a.m.	Introductions Purpose of Class

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8:15 a.m.	Overview: Comprehensive Emergency Management
9:15 a.m.	Break
9:30 a.m.	Orientation: Incident Command System (ICS)
10:30 a.m.	Break
10:45 a.m.	Introduction: Hospital Emergency Incident Command System
12:00 p.m.	Lunch
1:00 p.m.	Exercise Design for Health Care Facilities
2:30 p.m.	Break
2:45 p.m.	Tabletop Exercise
4:15 p.m.	Questions/Answers
4:30 p.m.	Summary
5.00 p.m.	Evaluation

Review of Objectives

8:10 a.m.

Main Conference

Tuesday, September 19, 2000

7:00 a.m. Registration
Continental Breakfast
Exhibits

8:00 a.m. Welcoming & Announcements

Paul D. Kim, M.D. Kristi Koenig, M.D., F.A.C.E.P.

Lawrence Flesh, M.D.

8:05 a.m. Preparation for

and Response to

Terrorism:

The Israeli Experience

Jacov Adler, M.D.

Due to political and religious atmosphere of the region, Israel has been the target and victim of countless violent terrorist attacks. A major part of the Israeli life is being prepared and responding to the threats of terrorism. Are we addressing the threat of terrorism as seriously as the State of Israel and should we?

Learning Objectives:

- Cite specific WMD preparedness measures employed by Israel;
- List examples of "real world" WMD incidents encountered by the government and people of Israel;
- List "lessons learned" by the Israeli planners that have impacted WMD preparedness efforts.

10:00 a.m. Break/Exhibits

10:30 a.m. Terror within Our Borders:

Preparing for the Unthinkable Paul Maniscalco Henry Christen

Despite the warnings and incidents occurring within our borders, are we preparing for what many experts feel is inevitable? Are we preparing the way we should be?

Learning Objective:

 Describe emergency medical preparedness measures in the United States in preparing for and responding to acts of terrorism;

12:30 p.m. Lunch/Exhibits

1:30 p.m. Crisis Counseling in

Mass Fatality Incidents

John Tassey, Ph.D.

In disaster response, the mental health needs of the rescue workers is often overlooked. Crisis counseling and aftermath readjustment must be a part of all preparedness and planning.

Learning Objective:

 Describe therapeutic intervention approaches used in counseling survivors and responders in mass fatality incidents.

3:15 p.m. Break/Exhibits

3:30 p.m. Interface with the Public and Media

During a Large Scale Incident

Moderator: Paul D. Kim, M.D.
Panelists: Jacov Adler, M.D.
Paul Maniscalco

Henry Christen
David Cid

John Tassey, Ph.D.

A critical dynamic during any large-scale incident is the need to communicate quickly and effectively with the public, including the media. Many emergency managers are highly technically trained, but are challenged in communicating with the mass media in ways that are both appropriately informative and helpful in maintaining public safety, health and order. This session's panelists will offer the benefits of their experience in working with the media during the "high concern-low trust" phases of large-scale incidents.

Learning Objective:

 Discuss important issues for the emergency manager when interfacing with the public (and media) exposed to a natural or technological hazardous incident.

5:00 p.m. Evaluation

7-9:00 p.m. Ice Breaker

Please join the Symposium Planning Committee for hors d'oeuvres, cash bar and great company! A time to unwind, make friends and share stories.

Wednesday, September 20, 2000

7:00 a.m. Registration

Continental Breakfast

Exhibits

Concurrent Sessions

Hospital Emergency Management Track

8:00 a.m. The Emergency Manager's Role in

Contingency Planning and Response

David Teeter, Pharm.D. Philip Wooten, Ph.D.

Connie Boatright, M.S.N., R.N.

Several Federal programs address contingency planning and emergency response. The Federal Response Plan provides the framework for how the Federal government responds to disasters. The National Disaster Medical System is a cooperative, asset-sharing partnership responsible for Federal health and medical support in natural and man-made disasters. During conflicts or national emergencies, the Department of Veterans Affairs provides medical assistance to the Department of Defense through the VA/DOD Contingency Plan.

Learning Objectives:

- Describe the National Disaster Medical System (NDMS);
- List the federal partners of the NDMS;
- Cite the three distinct missions of the NDMS;
- Describe how VA medical centers provide medical support to DoD during war/emergencies;
- Discuss how VA medical centers plan for DoD support.

Health and Medical Consequences of Disasters Track

8:00 a.m. A Blueprint for a Bioterrorism Readiness Plan:

Albany Medical Center's Experience with the

1999 E. coli Outbreak

Lorraine Martin, B.S.N., R.N.

Cindy Novak, R.N. Richard Puff, B.S.

Raymond F. Walsh, M.D.

Donna Weatherwax, R.N., C.I.C.

The summer of 1999 saw the city of Albany and the surrounding area come under attack by an unseen, tasteless and very aggressive enemy. The E-Coli Outbreak of 1999, traced to a contaminated water supply at the Washington County Fair grew to be the biggest outbreak in United States history. This program will review a hospital's response to the outbreak. Contents include case identification and communication with public health, media coordination, medical management, equipment and resource issues and the psychosocial implications.

Learning Objectives

- Acknowledge the importance of a team approach and the need for ongoing, accurate communication.
- Recognize the importance of coordination with public health and the media:
- Identify the psychosocial implications of a public health crisis;
- Utilize this information when developing disaster preparedness plans.

Disasters in the Community Track

8:00 a.m. Establishing and Maintaining

Community Partnerships

Edward Lord

Rebecca Weber, R.N.

Meaningful and realistic training exercises are vital to the training, education and preparedness of communities and regions. Partnerships established before, during and after the planning stages ensure a more coordinated community response and improve opportunities for learning from such exercises. This presentation will offer an overview of a CDC- supported initiative with key stakeholders in Minnesota to develop a preparedness and response plan for acts of terrorism, including chemical and biologic elements. More specifically, the discussion will focus on "Joint Regional Exercise 2000" (J-REX 2000) as example of an effective model for planning and executing a full-scale bioterrorism exercise, utilizing a "timeline matrix" process. Copies of the J-REX 2000 plan will be available for workshop participants.

Learning Objectives:

- Cite important concepts necessary in successful community partnerships;
- Demonstrate the utility of utilizing a "timeline matrix" in designing educational symposia and training exercises.

Practicum in WMD Track

8:00 a.m. Management of the HAZMAT Patient:

Decontamination Procedures

Bob Harty, EMT/P

This session will provide a thorough review of procedures for the decontamination of the chemically-contaminated patient and the impact on the hospital environment.

Learning Objective:

 Demonstrate protective measures applied to working with victims contaminated with hazardous substances.

10:00 a.m. Break/Exhibits

Hospital Emergency Management Track

10:30 a.m. Hospital Emergency

Incident Command System (HEICS)

Liane Monroe

HEICS is the emergency management system of the 21st century for all healthcare facilities. Understanding the system and the resources required for implementing the system is required for a coordinated response to a disaster or emergency event.

Learning Objective:

 Cite important principles in establishing and applying the Hospital Emergency Incident Command System (HEICS)

Health and Medical Consequences of Disasters Track

10:30 a.m. Part I: Assessment and Treatment of Victims

with Crush Injuries Michael Olinger, M.D.

This session will provide an authoritative review of the pathophysiology, clinical features, and medical management of crush syndrome.

Learning Objectives:

- Discuss the clinical spectrum of crush injury in disasters;
- Outline the issues in diagnosing crush syndrome in the austere post-disaster environment and the Emergency Department settings:
- Determine specific interventions required in the treatment of crush syndrome.

11:30 a.m. Part II: Tele-medicine in Emergency Response

Adam Darkins, M.D.

Telemedicine is a way to offer health care in emergency situations. This presentation addresses key issues related to the use of Telemedicine in emergency situations such as: needs assessment, infomatics support, assembling the teams, competition for scarce telecommunications bandwidth and managing the logistics.

Learning Objective:

- Cite the key steps and cooperation required in providing up to the minute patient care as the magnitude of the event increases with time;
- Identify key issues related to the use of Tele-medicine in emergency situations.

Disasters in the Community Track

10:30 a.m. Chemical vs. Biological Attack:

Is the Response Different?
Major Michael V. Malone, U.S.M.C.

Too often the response to a chemical and/or biological attack is viewed as one in the same when, in fact, these incidents differ in many ways.

Learning Objective:

 Cite measures essential in response and management of potential and actual incidents involving chemical or biological terrorism.

Practicum in WMD Track

10:30 a.m. Roles and Responsibilities of

Weapons of Mass Destruction (WMD)

Civil Support Teams

Lieutenant Colonel Robert Domenici and WMD Civil Support Team

Formerly known as RAID, the WMD Civil Support Team is a highly trained, elite group of National Guard personnel charged with assisting local, state and federal entities in surveillance and detection capabilities.

Learning Objective:

Cite specific mission and resources of WMD Civil Support Teams

12:30 p.m. Lunch

1:30 p.m. When They All Show Up:

Mass Gathering Medical Management

Michael Olinger, M.D.

Woodstock, Superbowl, Indianapolis 500, Olympics - mass gatherings present their own unique logistical and medical problems. Where do you begin when they all decide your community will host 250,000-500,000 extra human beings?

Learning Objectives:

- Describe how the characteristics of any given mass gathering event can be used to predict the types and numbers of potential patients event organizers should be prepared to manage;
- Explain some of the strategies and tactics used by medical service planners of mass gathering events to quickly locate access and treat injured or ill spectators;
- Describe the types of facilities, transportation and equipment requirements for providing medical coverage of a mass gathering event.

2:30 p.m. Who's in Charge?

Command, Control and Communication in a Mass Casualty Incident

in a Mass Casualty Incident

Moderator: Connie Boatright, M.S.N., R.N.

Panelists: Michael Olinger, M.D.
Paul Maniscalco

Ellery Gray, Ph.D. John Tassey, Ph.D.

The best-laid plans are useless when no one is in charge or there is disagreement about who should be in charge. The panel will discuss and detail the need for Unified Command and the specific requirements necessary for success.

Learning Objectives:

- Cite common jurisdictional "problems";
- List potential "solutions" for successful command and control of disaster response resources;
- Explain Incident Management System and how it is applied in a disaster.

3:30 p.m. Break (Beverages to go)

3:30–4 p.m. Buses to Colonie Training Center

Interested individuals will be bused a short 5 minutes to the New York State Fire Training Facility for a demonstration by the New York State Urban Search and Rescue Team.

4:00 p.m. New York State Regional

Urban Search and Rescue Demonstration

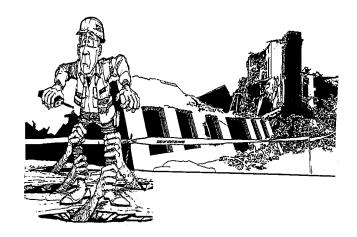
Colonie Training Center Brain Rousseau, A.S. Kevin Terry, A.S.

The Capital District Urban/Technical Search and Rescue Regional Response Team (NYRRT-1) in conjunction with the New York State Office of Fire Prevention and Control will be discussing the configuration of the New York State rescue program. Topics to be covered include training curriculum development, equipment cache acquisition, and personnel staffing. The team will then display the equipment cache and demonstrate various technical rescue operations including building collapse, rope rescue, confined space, and trench collapse operations.

Learning Objective:

 Provide basic knowledge of the roles and responsibilities of the New York State Regional Urban Search and Rescue Team.

6:00 p.m. Evaluation



Thursday, September 21, 2000

7:00 a.m. Registration

Continental Breakfast

8:00 a.m. Announcements

Paul D. Kim, M.D.

8:05 a.m. Establishing and Maintaining a

Large Scale Sheltering System

for Disaster Victims

Ellery Gray, Ph.D.

Evacuation to a shelter can be life altering, mentally draining and a physically exhausting experience for everyone involved. If not organized and well planned sheltering can create a dangerously unsafe atmosphere. Pre-planning and training are essential to success and safety.

Learning Objective:

 Describe essential measures necessary for establishing sheltering program for disaster victims.

10:00 a.m. Break

Concurrent Sessions

Hospital Emergency Management Track

10:30 a.m. Part I: The Roles of the

Emergency Preparedness Coordinator (EPC),

JCAHO and Emergency Preparedness

Kristi Koenig, M.D., F.A.C.E.P.

The Emergency Preparedness Coordinator is a vital and important link in the Department of Veterans Affairs emergency preparedness efforts. The EPC and the JCAHO EC Standards play a vital role in the readiness of the nation's VA Medical Centers.

Learning Objectives:

- Provide basic information to the VA's Emergency Preparedness Coordinators on their roles and responsibilities in regards to emergency management.
- Provide basic information on JCAHO changes as they pertain to the Environment of Care Standards on Emergency Preparedness

11:00 a.m. Part II: The Threat of Terrorism:

Environment of Care Issues

James Orme

The VA's role in the overall response to terrorism is on the frontlines. How will your medical center respond?

Learning Objective:

List principles of Environment of Care (EC) as applied to potential threat of terrorism.

11:45 a.m. Part III: Is Your Hospital Prepared?

John Beatty

Today, emergency preparations of our hospitals involve more than just defining the capabilities of the hospital to treat large numbers of victims at a moment's notice. The hospital of the 21st Century must be prepared to deal with the possibility of chemically and biologically contaminated patients arriving for treatment. "Is Your Hospital Prepared?" will detail the procedures necessary to properly assess your hospital readiness based on regulatory requirements, community standards, current staffing levels and available training.

Learning Objective:

- Assess the hospital's capability to decontaminate during chemical accidents;
- Describe regulatory requirements that govern the use of PPE;
- Integrate response activities with the local community;
- Discuss training, medical surveillance, and related requirements that affect the hospital's long range plan to maintain response readiness to Hazmat incidents.

Health and Medical Consequences of Disasters Track

10:30 a.m. Part I: Treatment of Victims

Exposed to Radiation Fun Fong, M.D., F.A.C.E.P.

Experts reveal that with the breakup of the Soviet Union the threat of a nuclear accident or a rogue government obtaining a nuclear weapon is more likely today than ever before. Are we prepared to treat victims of either scenario?

Learning Objective:

 Outline medical management of victims exposed to nuclear/ radiation agents.

11:30 a.m. Part II: Role of the Lab

in Surveillance and Detection

James Snyder, Ph.D.

The first line of defense in any healthcare system is the surveillance system. Early warning, diagnosis and detection are essential components of a solid surveillance system. How does your local system rate?

Learning Objective:

 Describe the role of the laboratory in surveillance and detection of biological agents.

Disasters in the Community Track

10:30 a.m. Cyber-Crime: Overview

Robert Osgood

The recent high profile crimes involving the use of the Internet have government agencies, corporate America and the healthcare delivery system worrying who is next. Are you prepared to prevent, respond and recover from such a crime?

Learning Objective:

 Cite measures essential in prevention and management of potential cyber terrorism incidents.

Practicum in WMD Track

10:30 a.m. Urban Search and Rescue

for Non-Professionals

Pat Jocius, M.S.

The first 15 minutes of any critical incident and how people respond will help determine the outcome of the incident. How will you respond and can you wait for the professional to get you or your loved ones to safety?

Learning Objective:

 Describe rules, roles and responsibilities for non-professionals involved in an urban search and rescue operation.

12:30 p.m. Lunch

Concurrent Sessions

Hospital Emergency Management Track

1:30 P.M. Establishing an EOC

and Emergency Communications

Michael Reik James Carmona

One of the many assumptions of disaster response is everyone will know how an Emergency Operations Center (EOC) will operate and function. What is required for a functional EOC and maintenance of vital communication links? Why are communications "SO" important in a disaster? Participants will be able to see a display of communications equipment (VHF portable base station, Bendix King and Motorola handheld radios, FMS low cost radios, and satellite telephones).

Learning Objective:

• List principles in establishing an emergency operations center (EOC), including communication measures.

Health and Medical Consequences of Disasters Track

1:30 p.m. Managing the Medical Consequences of

Chemical and Biological Agents

John Urbanetti, M.D.

When was the last time your ER saw a case of Smallpox, exposure to Anthrax or even an over-the-counter pesticide? Is treatment available? Is the knowledge available to treat the patient? Are the experts up on the latest information?

Learning Objective:

 Outline medical management of victims exposed to biological or chemical agents.

Disasters in the Community Track

1:30 p.m. The Columbine Shooting, Lessons Learned

Suzanne Mencer

On April 20, 1999, two high school students determined to leave their mark on the history books committed the worst act of school violence to date. Once the smoke cleared, the death toll, the violence and the senseless slaughter of innocent children shocked the nation. Have we learned anything?

Learning Objectives:

- Discuss the events surrounding April 20, 1999 at Columbine High School, to include building security, emergency plans, equipment problems, crowd control issues, media problems, communication issues, as well as the atmosphere in the Columbine community;
- List security recommendations made by the Jefferson County Task Force and the status of those recommendations;
- Develop awareness that increased school security does not come
 without a cost, both in human resources and in dollars, but there
 are some low cost initiatives for the schools, for law enforcement,
 and for the parents and community, to increase school security
 and student safety;
- Identify areas in your own community and/or school system that could be improved and ways to improve them based on the lessons learned from Columbine;
- Describe important prevention and management issues applied to a large-scale incident, e.g., school shooting.

Practicum in WMD Track

1:30 p.m. Safe and Effective Wearing of

Personal Protective Equipment

James Orme John Beatty

What if a patient suffering from exposure to an unknown substance walked into your medical facility? Would personal protective equipment be available to you? Have you been trained and fitted for such equipment? Such a scenario can occur at any time.

Learning Objective:

 Demonstrate proper wearing of and safety measures associated with personal protective equipment (PPE).

3:30 p.m. Program Evaluation

Issuance of Certificates

4:00 p.m. Adjournment



Registration Information

September 18 – (00H5; TRACE CODE 00.V2.EMS.A) September 19 – 21 (00H6; TRACE CODE 00.V2.EMS.B)

Non-VA Employee Fees

- Registration fee is \$149 per person for September 18, 2000
- Registration fee is \$449 per person for September 19-21, 2000.
- Registration fee is \$558 per person for September 18-21, 2000.
- Registration fee includes tuition, continental breakfast, breaks, lunch, conference materials, and continuing education credits.

Early Bird Discount!

If we receive your payment by check, purchase order/purchase order number or credit card **by September 12, 2000**, the registration fee for September 18 is \$139 per person, \$399 for September 19-21or \$498 for September 18-21. This is a \$10 discount for September 18, \$50 discount for September 19-21, or \$60 discount for September 18-21 on each registration!

VA Employee Fees

September 18: \$30 September 19-21: \$90 September 18-21: \$120

Your tuition fee is waived. This required fee is for food/beverage only.

Registration/Payment

We will process your registration as soon as we receive payment (check, cash, credit card, purchase order number) or authorization from your employer. Registration is quick and convenient! You may:

Call us at (207) 623-5744 between 8: 00 a.m. and 4:30 p.m., Monday through Friday, and have your credit card, purchase order number or employer authorization ready

FAX us at (207) 621-4831, with a credit card, employer authorization, or purchase order number. For your convenience, our FAX is available 24 hours a day, 7 days a week!

Mail your registration, with a check (payable to "CHEP, Inc."), credit card number, purchase order number, or employer authorization to: CHEP (11C), VA Center, Togus, ME 04330

There is a \$15 fee if your check is returned to us.

Cancellations/Refunds

- You may send a substitute to this program at no additional charge. We will be happy to issue a refund or credit (described below) as long as you call our office at (207) 623-5744 or cancel your registration on or before the date of the program.
- If you cancel before the "Early Bird" date, you will get a refund (minus \$15 for processing).
- If you cancel after the "Early Bird" date, you will get a program credit in the amount of ONE-HALF (1/2) of the registration fee that you can use towards another CHEP program.

General

- If you have not received a confirmation letter by September 13, 2000, please call us at (207) 623-5744 to verify that we have received your registration and that space is available in the program.
- Your confirmation letter is a courtesy reminder that we send as soon as we process your registration. While it verifies that you have a confirmed space in the program, it is not required for admission.
- Because the conference room temperatures can fluctuate, we suggest dressing in layers to ensure your comfort.
- It is the VA program participant's responsibility to ensure that this learning is documented according to her/his locally prescribed process.

Registration Form

The 5th Annual Emergency Medical Preparedness Education Symposium September 18, 2000 (00H5;TraceCode 00.V2.EMS.A)
September 19-21, 2000 (00H6; Trace Code 00.V2.EMS.B)
Holiday Inn Turf on Wolf Road, 205 Wolf Road, Albany, New York

Name:		
(Last)	(First)	(Degree or licensure)
Title:		
Employer:		
Preferred Address	Home	Business
Street/P.O. Box		
City	ST.	Zip
Telephone	FAX	
email		
SSN (Needed to certi	fy attendance)	
I will be attending: () September 18, 20 () September 19-21 () September 18-21		rly, Space is Limited!)
Use Your Credit card () Visa () MasterC		er ()American Express
Name as it appears o	n card:	
(Please print)		
Card Number:		
Signature:		
Expiration Date:		

Special Needs

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staff will c	ou have special needs, please check here, and a member of our contact you for details. The Department of Veterans Affairs e Education System wants this activity to be accessible to all.
Selection	on of Sessions
Please re detailed li	gister me for the following sessions (see daily agenda for stings)
Wednes	day, September 20, 2000
E	- 10:00 a.m. (Select One) Emergency Manager's Role in Contingency Planning/Response The E-Coli Outbreak/Impact Establishing/Maintaining Community Partnerships Management of the HAZMAT Patient
H P C	n. – 12:30 p.m. (Select One) lospital Emergency Incident Command System Part I-Assessment/Treatment of Victims/Crush Injuries Part II-Telemedicine/Emergency Response Chemical vs. Biological Attk Roles/Responsibilities WMD Civil Support Teams
Thursda	ay, September 21, 2000
P P P P P C	n. – 12:30 p.m. (Select One) Part I-Role of Emergency Preparedness Coordinator Part II-Threat of Terrorism: Environment of Care Issues Part III-Is Your Hospital Prepared? Part I-Treatment of Victims Exposed to Radiation Part II-Role of the Lab in Surveillance/Detection Cyber Terrorism: The Latest Threat Urban Search and Rescue for Non-Professionals
E	- 3:30 p.m. (Select One) Establishing an EOC/Emergency Communications Managing Medical Consequences/Chemical & Biological Agents The Columbine Shooting, Lessons Learned Eafe Effective Wearing of Personal Protective Equipment

Complete This Form & FAX it to 207/621-4831!

Department of Veterans Affairs

CHEP (11C) Medical and Regional Office Center Togus, ME. 04330

Official Business